

Attorney's Docket No.: 42P9059PatentIn re the Application of: Frank L. Berry

(inventor(s))

Application No.: 09/739,233Filed: December 19, 2000For: Method and Apparatus For Multilevel Translation and Protection Table
(title)

COMMISSIONER FOR PATENTS

P.O. Box 1450

Alexandria, Virginia 22313-1450

SIR: Transmitted herewith is an Amendment for the above-referenced application.

Applicant claims small entity status. See 37 CFR 1.27.

XX

No additional fee is required.

The fee has been calculated as shown below:

	(Col. 1)		(Col. 2)	(Col. 3)	SMALL ENTITY		OTHER THAN A SMALL ENTITY	
	Claims Remaining After Amd.		Highest No. Previously Paid For	Present Extra	Rate	Additional Fee	Rate	Additional Fee
Total Claims	*	Minus	**	0	X9	\$	X18	\$
Indep. Claims	*	Minus	***	0	X43	\$	X86	\$
	First Presentation of Multiple Dependent Claim(s)				+145	\$	+290	\$
					Total Add. Fee	\$	Total Add. Fee	\$

* If the entry in Col. 1 is less than the entry in Col. 2, write "0" in Col. 3.

** If the "Highest No. Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.

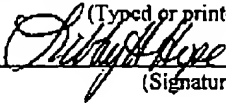
*** If the "Highest No. Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space. The "Highest No. Previously Paid For" (Total or Independent) is the highest number found from the equivalent box in Col. 1 of a prior amendment or the number of claims originally filed.

CERTIFICATE OF TRANSMISSION

I hereby certify that this correspondence is being facsimile transmitted to the U.S. Patent and Trademark Office on:

Date of Transmission May 11, 2004Libby H. Hope

(Typed or printed name of person transmitting paper)



(Signature of person transmitting paper)

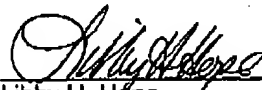
Docket No.: 42390P9059

Application No.: 09/739,233

- 1 -

_____ A check in the amount of \$_____ is attached for presentation of additional claim(s).
_____ Applicant(s) hereby Petition(s) for an Extension of Time pursuant to 37 C.F.R. § 1.136(a).
_____ A check for \$_____ is attached for processing fees under 37 C.F.R. § 1.17.
_____ Please charge my Deposit Account No. 50-0221 the amount of \$_____.
_____ **A duplicate copy of this sheet is enclosed.**
X _____ The Under Secretary of Commerce for Intellectual Property and Director of the United States
Patent and Trademark Office is hereby authorized to charge payment of the following fees
associated with this communication or credit any overpayment to Deposit Account No. 50-0221
(a duplicate copy of this sheet is enclosed):
_____ X _____ Any additional filing fees required under 37 C.F.R. § 1.16 for presentation of
extra claims.
_____ X _____ Any extension or petition fees under 37 C.F.R. § 1.17.

Date: May 11, 2004



Libby H. Hope
Reg. No. 46,774
Patent Practice Group
INTEL CORPORATION

c/o BLAKELY, SOKOLOFF, TAYLOR & ZAFMAN
12400 Wilshire Boulevard
Seventh Floor
Los Angeles, California 90025
(949) 498-0601

Attorney's Docket No.: 42P9059PatentIn re the Application of: Frank L. Berry

(inventor(s))

Application No.: 09/739,233Filed: December 19, 2000For: Method and Apparatus For Multilevel Translation and Protection Table
(title)

COMMISSIONER FOR PATENTS

P.O. Box 1450

Alexandria, Virginia 22313-1450

SIR: Transmitted herewith is an Amendment for the above-referenced application.

 Applicant claims small entity status. See 37 CFR 1.27.XX No additional fee is required.

The fee has been calculated as shown below:

(Col. 1)			(Col. 2)		(Col. 3)	
	Claims Remaining After Amd.		Highest No. Previously Paid For	Present Extra		
Total Claims	*	Minus	**	0		
Indep. Claims	*	Minus	***	0		
<div></div>	First Presentation of Multiple Dependent Claim(s)					
* If the entry in Col. 1 is less than the entry in Col. 2, write "0" in Col. 3.						

SMALL ENTITY	
Rate	Additional Fee
X9	\$
X43	\$
+145	\$
Total Add. Fee	\$

OTHER THAN SMALL ENTITY	
Rate	Additional Fee
X18	\$
X86	\$
+290	\$
Total Add. Fee	\$

* If the entry in Col. 1 is less than the entry in Col. 2, write "0" in Col. 3.

** If the "Highest No. Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.

*** If the "Highest No. Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space. The "Highest No. Previously Paid For" (Total or Independent) is the highest number found from the equivalent box in Col. 1 of a prior amendment or the number of claims originally filed.

CERTIFICATE OF TRANSMISSION

I hereby certify that this correspondence is being facsimile transmitted to the U.S. Patent and Trademark Office on:

Date of Transmission May 11, 2004Libby H. Hope

(Typed or printed name of person transmitting paper)



(Signature of person transmitting paper)


Docket No.: ~~42P9059~~ P9059

Application No.: 09/739,233

- 1 -

☐ A check in the amount of \$ _____ is attached for presentation of additional claim(s).
☐ Applicant(s) hereby Petition(s) for an Extension of Time pursuant to 37 C.F.R. § 1.136(a).
☐ A check for \$ _____ is attached for processing fees under 37 C.F.R. § 1.17.
☐ Please charge my Deposit Account No. 50-0221 the amount of \$ _____.
☒ **A duplicate copy of this sheet is enclosed.**
 The Under Secretary of Commerce for Intellectual Property and Director of the United States Patent and Trademark Office is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 50-0221 **(a duplicate copy of this sheet is enclosed):**
 ☒ Any additional filing fees required under 37 C.F.R. § 1.16 for presentation of extra claims.
 ☒ Any extension or petition fees under 37 C.F.R. § 1.17.

Date: May 11, 2004


Libby H. Hope
Reg. No. 46,774
Patent Practice Group
INTEL CORPORATION

c/o BLAKELY, SOKOLOFF, TAYLOR & ZAFMAN
12400 Wilshire Boulevard
Seventh Floor
Los Angeles, California 90025
(949) 498-0601

Our Docket No.: 42P9059

Utility Patent Application

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

RECEIVED
CENTRAL FAX CENTER

MAY 13 2004

In re the Patent Application of:

Berry, Frank

Serial No.: 09/739,233

Assignee: Intel Corporation

Filed: December 19, 2000

For: METHOD AND APPARATUS FOR MULTILEVEL
TRANSLATION AND PROTECTION TABLE

Examiner: Kennedy, Lesa

Art Unit: 2151

OFFICIAL

RESPONSE TO OFFICE ACTIONCommissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

CERTIFICATE OF FACSIMILE TRANSMISSION

I hereby certify that I am causing the above-referenced correspondence to be delivered to the USPTO via facsimile transmission to (703) 746-7239 and that this paper or fee has been addressed to Mail Stop Non-Fee Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Date of Deposit: May 11, 2004

Name of Person Delivering Correspondence: Libby H. Hope

Signature

Date

Docket No.: 42P9059

1

Utility Patent Application

Application No.: 09/739,233

INTRODUCTORY COMMENTS

Sir:

In response to the Office Action mailed February 11, 2004, Applicant respectfully requests the Examiner to enter the following amendment and to consider the following Remarks. Replacement FIG. 4 also accompanies this Response.

Amendments to the Specification begin on page 3 of this paper.

Amendments to the Drawing Figures begin on page 5 of this paper.

Remarks begin on page 6 of this paper.

An **Appendix**, including amended drawing figures is attached following page 9 of this paper.